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UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
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Bib Data Sheet

CONFIRMATION NO. 5118

<b>SERIAL NUMBER</b> 10/047,866	<b>FILING DATE</b> 01/15/2002 <b>RULE</b>	<b>CLASS</b> 709	<b>GROUP ART UNIT</b> 2151	<b>ATTORNEY DOCKET NO.</b> 84,355-003	
<b>APPLICANTS</b> Michael K. Schumacher, Waterford, MI;					
<b>** CONTINUING DATA *****</b> THIS APPLN CLAIMS BENEFIT OF 60/262,134 01/16/2001					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 02/13/2002					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> MI	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 30	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> 26127					
<b>TITLE</b> System and method for managing information for a plurality of computer systems in a distributed network					
<b>FILING FEE RECEIVED</b> 525	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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## \*BIBDATASHEET\*

CONFIRMATION NO. 5118

Bib Data Sheet

SERIAL NUMBER 10/047,866	FILING DATE 01/15/2002  RULE	CLASS 707 ✓	GROUP ART UNIT 2175 ✓	ATTORNEY DOCKET NO. 84,355-003
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APPLICANTS

Michael K. Schumacher, Waterford, MI;

\*\* CONTINUING DATA \*\*\*\*\*  
This appln claims benefit of 60/262,134 01/16/2001  
*cf bno*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
*none bno*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
\*\* 02/13/2002

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>Bliss M. Orr</i> Examiner's Signature Initials	STATE OR COUNTRY MI	SHEETS DRAWING 6 ✓	TOTAL CLAIMS 30 —	INDEPENDENT CLAIMS 3 —
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26127  
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39577 WOODWARD AVENUE  
SUITE 300  
BLOOMFIELD HILLS, MI  
48304-5086

TITLE  
System and method for managing information for a plurality of computer systems in a distributed network

FILING FEE  RECEIVED 525	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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